Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000384846 3)))



H220003848463ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : 120030000043 Phone : (800)342-9856 Fax Number : (800)354-3381

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
-------	----------	--	--	--

FLORIDA LIMITED LIABILITY CO. **MEJHT LLC**

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$125.00	

Electronic Filing Menu

Corporate Filing Menu

Help



(H220003848463)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	I - Name:
---------	-----------

The name of the Limited Liability Company is:

MEJHT LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

242 LINDA LANE

WEST PALM BEACH, FL 33405

242 LINDA LANE

WEST PALM BEACH, FL 33405

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MATTHEW TRUNDLE

Name

242 LINDA LANE

Florida street address (P.O. Box NOT acceptable)

WEST PALM BEACH

FL

33405

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

22 KEY 10 FH 12: 35

(H220003848463)

H22000384846

A	D	т	\sim	С	TT.
~	•				IV.

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
AMBR	MATTHEW TRUNDLE 242 LINDA LANE WEST PALM BEACH, FL	33405
AMBR	EDWARD TRUNDLE 8912 GRANT ST BETHESDA, MD 20817	
<u>AMBR</u>	JAKE TRUNDLE 200 WASHINGTON AVE BROOKLYN, NY 11205	
<u>AMBR</u>	HANNA KAMINSKY 430 EAST 56TH ST NEW YORK, NY 10022	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be spetthe date of filing.) Note: If the date inserted in this block does not me the document's effective date on the Department of	ecific and cannot be more than seet the applicable statutory filin	five business days prior to or 90 days after
ARTICLE VI: Other provisions, if any.		<u> </u>
REQUIRED SIGNATURE:	59	
Signature of a mei	mber or an authorized represe	ntative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

MATTHEW TRUNDLE

Typed or printed name of signee